

REASON

INSPECTION DATE

ESTABLISHMENT NAME

Regular

3 x 130 = 17

MARIA ARTERO CATHOLIC PRESCHOOL & KINDERGARTEN

Follow-up

INSPECTION TIME

OWNER/OPERATOR

Complaint

Hr. 55 Min.

MARIA ARTERO CATHOLIC PRESCHOOL & KINDERGARTEN

Complaint

TRAVEL TIME

LOCATION

Investigation

Hr. 15 Min.

AGANA HEIGHTS

Other (Specify)

SANITARY PERMIT NO.

PERMIT CATEGORY STATUS (Circle One)

[illegible]

Permanent, Temporary/Current, Expired

School

Based on an inspection this day, the items listed below identify violations in operation or facilities which must be corrected by the next routine inspection or such shorter period of time as may be specified by the Department. Failure to comply may result in cessation of your operations.

ITEM NO.

REMARKS

CORRECT BY:

A REGULAR INSPECTION WAS CONDUCTED

DATE _____

PREVIOUS INSPECTION CONDUCTED ON 12/15/16. (O, A)

THE FOLLOWING WERE OBSERVED:

NO NEW VIOLATIONS.

ISSUED "A" PLACARD # 01732.

BRIEFED AC ON THE ABOVE

I have read and understand the above violation(s) and I am aware of the corrective measures to be taken.

***When any of the following items are cited above, they shall be corrected within ten days of this inspection: (01), (02), (23), (27), (31).**

RECEIVED BY (Name and Title)

Sr. ANOTIA Addy, MMF
DEH INSPECTOR (Name and Title)

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